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APPLICATION NO.	FILING DATE	FIRST NAMED INV		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/508,967	04/07/2000	MATS WAF		REN	45300-59676	4801
TITLE OF INVENTION: M.					1506-1053	ŕ
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	09/12/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
MINNIFIELD, NITA M		1645		530-350000		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	PECIDENCE DATA TO B	E PRINTED ON T	L THE PATENT (prin	t or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be	elow, no assignee of this form is NO	data will appear on T a substitute for fil	the patent. If an assiging an assignment.	mee is identified below, the	document has been filed fo
(A) NAME OF ASSIGNI			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Karolinská Innovations AB			09/12/2006 MAHMED2 09000146 09508967 Stockholm, Sweden 01 FC:1501			
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the patent)		Corporation or other private gr	roup chill. 10 (18 vernmen
4a. The following fee(s) are enclosed: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			(if necessary) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
The Director of the USPTO	is requested to apply the Issublication Fee (if required) ords of the United States Pat	ue Fee and Publica	tion Fee (if any) or d from anyone other Office.	to re-apply any previou r than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party i
Authorized Signature	Benoît Co	astel		Date	September 11, 200	06
Typed or printed name Benoit CASTEL #35,041			<u> </u>	Registration	No. #35,041	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450.

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